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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number 60,446-243;03ZFM049 **DECLARATION FOR UTILITY OR** Iames Henry DeVore First Named Inventor

DESIG	SIN		James Homy De voic						
PATENT APP	LICATION		COMPLETE IF KNOWN						
(37 CFR	1.63)	Application	n Number						
Declaration	Declaration	Filing Dat	•						
Submitted OR L With Initial	Submitted after Filing (surcharg	I Art Unit	Art Unit						
Filing	(37 CFR 1.16 (errequired)		Name						
									
I hereby declare that:									
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.									
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
AUTOMATED MECHANICAL TRANSMISSION SYSTEM									
(Title of the Invention) the specification of which									
ਹਾਂ .									
is attached hereto									
OR									
was filed on (MM/DD/YYY	Υ)	as Ur	ited States Appl	ication Number or P	CT International				
Application Number	and w	as amended on (MM	DD/YYYY)		(if applicable).				
I hereby state that I have reviewe			ــــ ove identified spo	ecification, including	the claims, as				
amended by any amendment spe	ecifically referred to	above.							
I acknowledge the duty to discle									
continuation-in-part applications, and the national or PCT internation				he filing date of the	prior application				
I hereby claim foreign priority be	enefits under 35 U	.S.C. 119(a)-(d) or (f), or 365(b) of a	any foreign applicati	on(s) for patent,				
inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign									
application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date									
Prior Foreign Application		med. reign Filing Date	Priorit	Cortified (Copy Attached?				
Number(s)		(MM/DD/YYYY)	Not Clain		es No				
					H				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.									

[Page 1 of 2]

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DECLARATION — Utility or D sign Patent Application

Direct all correspondence to:	all correspondence to: Customer Number: 0260			96	OR Correspondence address below				
Name David L. Wisz									
Address 400 West Maple Road,	Suite 350		•••						
City Birmingham						State M1			ZIP 48009
Country United States	Telephone (248) 988-8360			Fax (248) 988-836					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor									
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Inventor's Signature Makeun Dello						Date 2003-11-04			
Residence: City Laurinburg	State NC			Coun U.S.	•			Cilizer U.S.	nship
Mailing Address 11400 Kerrimur Drive									
City Laurinburg	State NC				ZIP 2835			1	Country U.S.
NAME OF SECOND INVENTO	R:				A pe	tition h	es bee		or this unsigned inventor
Given Name (first and middle [if any])	rt Anthony				Family Name or Surname Sayman				
Inventor's Signature	~ <i>_</i>								Date 11/5/03
Residence: City Laurinburg	State NC			Country U.S.		Citizenship U.S.			
Mailing Address 12583 Lakewood Drive									
City Laurinburg	State NC				ZIP 28352)		Count	ту
	170					· 	_	U.S.	
Additional inventors or a legal re	presentative are bel	ng named on the	2 _B	uppleme	ntal sh a e	H(B) PTO	/SB/02A	or 02LR a	allached hereto.

[Page 2 of 2]

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DECLARATION ADDITIONAL INVENTOR(Supplemental Sheet					Page -	1 3 of		
Name of Additional Joint Inventor, if any:		A pet	tition I	has been filed for this	unsigned in	ventor		
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Inventor's Signature Chales < allen					Date /	-3-03		
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Mailing Address								
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Inventor's Signature								
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Mailing Address An den Schwalgen 29								
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City Euerbach	State	;		Zip 97502	Country	Germany		
Name of Additional Joint Inventor, if any:		☐ A pet	ition t	has been filed for this t	unsigned inv	entor/		
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Inventor's Signature		Date						
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Mailing Address								
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I ADDITIONAL INVENTOR(2)

DECLARATION	Supplemental Sheet Page 1 3							
Name of Additional Joint Inventor, if any:		A peti	ition h	nes been filed for this u	nsigned in	ventor		
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Charles E.		Allen, Jr.						
Inventor's Signature				C	Date			
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555 Ten Point Drive Mailing Address					······································			
Mailing Address								
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Name of Additional Joint Inventor, if any:		☐ A ped	ition h	as been filed for this ur	rsigned inv	/entor		
Given Name (first and middle (if any)	Family Name or Surname							
Winfried		Stürmer						
Inventor's Winfried Stirm	~	Cate	N	ov. 17, 200	73			
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Mailing Address An den Schwalgen 29								
Mailing Address				•				
City Euerbach	State			Zip 97502	Country	Germany		
Name of Additional Joint Inventor, if any:		☐ A pet	tion h	as been filed for this u	asigned inv	/entor		
Given Name (first and middle (if any)		Family Name or Sumame						
Karl-Fritz	Keinzelmann							
Inventor's Signature		Date						
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Mailing Address Schuster-Str. 25								
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Meckenbeuren City	State			D88074	Country	Germany		

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DECLARATION			Supplemental Sheet 1 Page of			
Name of Additional Joint Inventor if any		☐ A ref	tition he	as been filed for this u	unsigned inve	entor
Name of Additional Joint Inventor, if any:		,=				
Given Name (first and middle (if any) Charles E.		Family Nan Allen, Jr.	ne or Si	umame		
Charles E.		7111011, 37.				
Inventor's Signature					Date	
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555 Ten Point Drive Mailing Address						
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Name of Additional Joint Inventor, if any:		☐ A pe	tition h	as been filed for this	unsigned inv	entor
Given Name (first and middle (if any)				Family Name or	Sumame	
Winfried		Stürmer				•
Inventor's Signature		Date				
Residence: City Euerbach	State			Country Germany		Germany Citizenship
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Name of Additional Joint Inventor, if any:		□ Ape	etition h	as been filed for this	unsigned inv	ventor
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Karl-Fritz	Keinzelmann					
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DECLARATION			ADDITIONAL INVENTOR(S) Supplemental Sheet Page -2 of					
Name of Additional Joint Inventor, if any:	• •		A pe	tition h	nas been filed for this	unsigned inv	rentor	
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Ludger			Ronge					
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Name of Additional Joint Inventor, if any:			□ Ape	tition !	has been filed for this	unsigned in	ventor	
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Inventor's Signature			Date					
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Mailing Address Konstantin-Schmach Str. 5								
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City

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Name of Additional Joint Inventor, if any:		☐ A pe	tition i	has been filed for this (unsigned in	ventor	
Given Name (first and middle (If any)		Family Nan	ne or	Sumame			
Ludger		Ronge					
Inventor's Signature		_			Date		
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Mailing Address							
Eriskirch City	State			88091 Zlp	Country	Germany	
Name of Additional Joint Inventor, if any:		☐ A pel	lition t	nas been filed for this u	ınsignod im	ventor	
Given Name (first and middle (if any)	Family Name or Sumanie						
Loren Christopher		Dreier					
Inventor's Signature		Nev L	03				
Residence: City Vass	State	NC Country U.S.			Citizenship U.S		
Mailing Address 1231 Greenbriar Pl.						<u> </u>	
Malling Address							
City Vass	State	NC		Zlp 28394	Country	U.S.	
Name of Additional Joint Inventor, if any:		A pet	ilion h	as been filed for this u	insigned inv	rentor	
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Ronald Peter	Muetzel						
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ADDITIONAL INVENTOR(S)

DECLARATION	Supplemental Sheet Page 3 of 3							
Name of Additional Joint Inventor, if any:		A potit	lon has been filed for this	unsigned in	/entor			
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Mailing Address	-							
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Name of Additional Joint Inventor, if any:		A petit	ion has been filed for this	s unsigned in	/entor			
Given Name (first and middle (if any)	Family Name or Surname							
Inventor's Signature		Date						
Residence: City	State		Country		Citizenship			
Mailing Address								
Mailing Address								
City	State		Zip 88045	Country				
Name of Additional Joint Inventor, if any:		☐ A petit	ion has been filed for this	s unsigned in	ventor			
Given Name (first and middle (if any)		Family Name or Surname						
Inventor's Signature		Date						
Residence: City	State		Country		Citizenship			
Mailing Address								
Mailing Address	_							
City	State	Zip		Country				

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